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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application No.	10/014,743		
	Filing Date	October 29, 2001	
	First Named Inventor	Linda G. LEE	
	Examiner Name	J. Riley	
	Group Art Unit	1637	
Total Number of Pages in This Submission		Attorney Docket No.	A-72076-4/AMP

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	check
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, No. of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Ann M. Caviani Pease (42,067)
Signature	
Date	June 2, 2003



**AMENDMENT
FEE CALCULATION
2003**

Complete if Known

Application No.	10/014,743
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Claims as Amended in Response to Office Action dated:

METHOD OF PAYMENT (Check One)		AMENDMENT FEE CALCULATION (Continued)			
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account No.: <u>50-2319</u> Deposit Account Name: <u>DORSEY & WHITNEY LLP</u> <input type="checkbox"/> Charge any additional fee required under 37 C.F.R. 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status (see 37 C.F.R. 1.27)		3. ADDITIONAL FEES			
2. <input checked="" type="checkbox"/> Check Enclosed		Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid
		110	55	Extension for reply within first month	
		410	205	Extension for reply within second month	
		930	465	Extension for reply within third month	\$930.00
		1,450	725	Extension for reply within fourth month	
		1,970	985	Extension for reply within fifth month	
		320	160	Notice of Appeal	
		320	160	Filing a brief in support of an appeal	
		280	140	Request for oral hearing	
		110	55	Terminal Disclaimer Fee	
		110	55	Petition to revive – unavoidable	
		1,300	650	Petition to revive – unintentional	
		1,300	650	Utility/Reissue issue fee (inc. advance copies)	
		130	130	Petitions to the Commissioner	
		180	180	Submission of IDS	\$180.00
		750	375	Request for Continued Examination (RCE)	
		Other fee (specify):			
		Subtotal (2) 930.00			
		Total Amount of Payment: \$3070.00			

1. EXTRA* CLAIM FEES					
Claims Remaining after Amendment	Highest Number Previously Paid for	Present Extra	Fee from Below*	Additional Fee	
Total 104	- 20	= 84	x 18	=	\$1512.00
Indep. 5	- 3	= 2	x 84	=	\$168.00
First Presentation of Multiple Dependent Claim			x	=	\$280.00
Subtotal (1)					\$1960.00

*Calculation of Extra Claim Fees

Large Entity Fee	Small Entity Fee	Fee Description
18	9	Claims in excess of 20
84	42	Independent claims in excess of 3
280	140	Multiple dependent Claim
84	42	Reissue independent claims over original patent
18	9	Reissue claims in excess of 20 and over original patent

Submitted by:

Name: Ann M. Caviani Pease	Reg. No.: 42,067	Telephone: (650) 494-8700
DORSEY & WHITNEY LLP	Four Embarcadero Center, Suite 3400 San Francisco, California 94111-4187	CUSTOMER NUMBER 32940
Signature:	Date:	